

(SPONSORING AGENCY LETTERHEAD)

(OFFICE SYMBOL)

(DATE)

MEMORANDUM FOR Provost Marshall Yongsan, ATTN: Admin Section

SUBJECT: Request for Provost Marshall Records Check

1. Request a records check be conducted on the following Individual(s):

NAME: Doe, John

SSN: 123-45-6789

Invited Contractor (IC) or Technical Representative (TR)

Date entered the ROK: _____ DEROS: _____

2. Purpose of this request is for verification of SOFA Status for USFK Form 175-R.
3. POC is the undersigned, DSN XXX-XXXX.

JANE DOE
Responsible Officer
HHC 1st Signal Bde

Provost Marshall Office, ATTN: Admin, APO AP 96205

For Program Manager, HHC 1st Signal Brigade, Unit # 15555, APO AP 96205-0001.

A records check was conducted for the above individual(s) and disclosed the following:

☐ No record of derogatory information as of _____.

☐ Information listed as enclosure.